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FACSIMILE COVER SHEET

JUN 16 2005

 Deliver to: Vincent E. Kovalick, USPTO Art Group: 2673

 Facsimile No.: 703-872-9306 Date: June 16, 2005

 From: William W. Schaal, Reg. No. 39,018

 Our Docket No.: 42390P6729 Number of pages 5 including this sheet.

 Application No.: 09/540,166 Filing Date: 3/31/2000

Docket Due Date(s): _____

Enclosed are the following documents:

- | | |
|---|---|
| <input type="checkbox"/> Amendment (____ pgs) | <input type="checkbox"/> Issue Fee Transmittal |
| <input type="checkbox"/> Appeal Brief (____ pgs) | <input type="checkbox"/> Notice of Appeal |
| <input type="checkbox"/> Application: _____ (____ pgs) w/cover & abstract) | <input type="checkbox"/> Petition for: _____ |
| <input type="checkbox"/> Assignment & Cover Sheet (____ pgs) | <input type="checkbox"/> Request for Continued Examination (RCE) |
| <input checked="" type="checkbox"/> Certificate of Mailing _____ | <input type="checkbox"/> Reply Brief (____ pgs) |
| <input type="checkbox"/> Continued Prosecution Application (CPA) | <input type="checkbox"/> Request & Certification Under 35 USC 122(b)(2)(B)(i) |
| <input type="checkbox"/> Declaration & POA (____ pgs) | <input type="checkbox"/> Request to Rescind Previous Nonpublication Request |
| <input type="checkbox"/> Drawings: ____ sheets, ____ figures | <input type="checkbox"/> Response to Notice of Missing Parts & Formalities Letter |
| <input type="checkbox"/> Extension of Time: _____ | <input type="checkbox"/> Response to Written Opinion (____ pgs) |
| <input checked="" type="checkbox"/> Fee Transmittal (in duplicate) | <input type="checkbox"/> Terminal Disclaimer |
| <input type="checkbox"/> IDS & PTO/SB/08 (____ pgs) | <input type="checkbox"/> Transmittal of Publication Fee Due |
| <input type="checkbox"/> Other Comments on Statement of Reasons for Allowance _____ | <input checked="" type="checkbox"/> Transmittal Letter |

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.84)

I hereby certify that this correspondence is being transmitted by facsimile on the date shown below to the United States Patent and Trademark Office.


Susan McFarlane 6/16/2005
 Susan McFarlane Date


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| | | | |
|--|---|------------------------|---------------------|
| TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i> | | Application No. | 09/540,166 |
| | | Filing Date | March 31, 2000 |
| | | First Named Inventor | Scott A. Rosenberg |
| | | Art Unit | 2673 |
| | | Examiner Name | Vincent E. Kovalick |
| Total Number of Pages in This Submission | 4 | Attorney Docket Number | 42390P6729 |

| ENCLOSURES (check all that apply) | | |
|--|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> Comments on Statement of Reasons for Allowance </div> |
| Remarks | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
|--|--|
| Firm or Individual name | William W. Schaal, Reg. No. 39,018 BLAKELY SOKOLOFF, TAYLOR & ZAFMAN LLP |
| Signature |  |
| Date | June 16, 2005 |

| CERTIFICATE OF MAILING/TRANSMISSION | | | |
|--|---|------|---------------|
| I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office. | | | |
| Typed or printed name | Susan McFarlane | Date | June 16, 2005 |
| Signature |  | | |

Based on PTO/SB/21 (04-04) as modified by Blakely, Sokoloff, Taylor & Zafman (w/1) 06/04/2004.
 SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$) 0.00

Complete If Known

Application Number 09/540,166
Filing Date March 31, 2000
First Named Inventor Scott A. Rosenberg
Examiner Name Vincent E. Kovalick
Art Unit 2673
Attorney Docket No. 42390P6729

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify): _____
☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman L.L.P.
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
☐ Charge fee(s) indicated below
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.
☐ Charge fee(s) indicated below, except for the filing fee
☐ Credit any overpayments

FEE CALCULATION

1. EXTRA CLAIM FEES

| Total Claims | Extra Claims | Fee from below | Fee Paid |
|--------------------|--------------|----------------|----------|
| 12 | 20* | 0 | \$0.00 |
| Independent Claims | 2 | 0 | \$0.00 |
| Multiple Dependent | | | |

| Large Entity | | Small Entity | | Fee Description |
|--------------|----------|--------------|----------|---|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | |
| 1202 | 50 | 2202 | 25 | Claims in excess of 20 |
| 1201 | 200 | 2201 | 100 | Independent claims in excess of 3 |
| 1203 | 300 | 2203 | 100 | Multiple Dependent claims, if not paid |
| 1204 | 300 | 2204 | 150 | **Reissue independent claims over original patent |
| 1205 | 300 | 2205 | 150 | **Reissue claims in excess of 20 and over original patent |
| SUBTOTAL (1) | | | | (3) 0.00 |

*or number previously paid, if greater. For Reissues, see below

2. ADDITIONAL FEES

| Large Entity | | Small Entity | | Fee Description | Fee Paid |
|---------------------|----------|--------------|----------|--|----------|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | | |
| 1051 | 130 | 2051 | 65 | Surcharge - late filing fee or oath | |
| 1052 | 50 | 2052 | 25 | Surcharge - late provisional filing fee or cover sheet | |
| 2053 | 130 | 2053 | 130 | Non-English specification | |
| 1251 | 120 | 2251 | 60 | Extension for reply within first month | |
| 1252 | 450 | 2252 | 225 | Extension for reply within second month | |
| 1253 | 1,020 | 2253 | 510 | Extension for reply within third month | |
| 1254 | 1,690 | 2254 | 735 | Extension for reply within fourth month | |
| 1255 | 2,160 | 2255 | 1,080 | Extension for reply within fifth month | |
| 1401 | 500 | 2401 | 250 | Notice of Appeal | |
| 1402 | 500 | 2402 | 250 | Filing a brief in support of an appeal | |
| 1403 | 1,000 | 2403 | 500 | Request for oral hearing | |
| 1451 | 1,510 | 2451 | 1,510 | Petition to institute a public use proceeding | |
| 1460 | 130 | 2460 | 130 | Petitions to the Commissioner | |
| 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(d) | |
| 1808 | 110 | 1808 | 110 | Submission of Information Disclosure Stmt | |
| 1809 | 760 | 1809 | 395 | Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 1810 | 790 | 2010 | 395 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| Other fee (specify) | | | | | |
| SUBTOTAL (2) | | | | (3) | |

SUBMITTED BY

Name (Print/Type) William W. Schaal

Signature

Registration No.
(Attorney/Agent)

39,018

Telephone

(714) 557-3800

Date

06/16/05

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (M/R) 12/16/2004.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$) 0.00

Complete if Known

Application Number 09/540,166
Filing Date March 31, 2000
First Named Inventor Scott A. Rosenberg
Examiner Name Vincent E. Kovalick
Art Unit 2673
Attorney Docket No. 42390P6729

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify):
☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman I.L.P.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.
☐ Charge fee(s) indicated below, except for the filing fee
☐ Credit any overpayments

FEE CALCULATION

1. EXTRA CLAIM FEES

| 1. EXTRA CLAIM FEES | | Extra Claims | Fee from below | Fee Paid |
|---------------------|----|--------------|----------------|----------|
| Total Claims | 12 | 0 | 50.00 | \$0.00 |
| Independent Claims | 2 | 0 | 200.00 | \$0.00 |
| Multiple Dependent | | | | |

| Large Entity | | Small Entity | | Fee Description | |
|--------------|----------|--------------|----------|---|------|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | | |
| 1202 | 50 | 2202 | 25 | Claims in excess of 20 | |
| 1201 | 200 | 2201 | 100 | Independent claims in excess of 3 | |
| 1203 | 360 | 2203 | 180 | Multiple Dependent claim, if not paid | |
| 1204 | 300 | 2204 | 150 | **Reissue independent claims over original patent | |
| 1205 | 300 | 2205 | 150 | **Reissue claims in excess of 20 and over original patent | |
| SUBTOTAL (1) | | | | (\$) | 0.00 |

*or number previously paid, if greater, For Reissues, see below

2. ADDITIONAL FEES

| Large Entity | | Small Entity | | Fee Description |
|---------------------|----------|--------------|----------|--|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | |
| 1051 | 130 | 2051 | 65 | Surcharge - late filing fee or oath |
| 1052 | 50 | 2052 | 25 | Surcharge - late provisional filing fee or cover sheet. |
| 2053 | 130 | 2053 | 130 | Non-English specification |
| 1251 | 120 | 2251 | 80 | Extension for reply within first month |
| 1252 | 450 | 2252 | 225 | Extension for reply within second month |
| 1253 | 1,020 | 2253 | 510 | Extension for reply within third month |
| 1254 | 1,500 | 2254 | 750 | Extension for reply within fourth month |
| 1255 | 2,160 | 2255 | 1,080 | Extension for reply within fifth month |
| 1401 | 500 | 2401 | 250 | Notice of Appeal |
| 1402 | 500 | 2402 | 250 | Filing a brief in support of an appeal |
| 1403 | 1,000 | 2403 | 500 | Request for oral hearing |
| 1404 | 1,510 | 2404 | 1,510 | Petition to institute a public use proceeding |
| 1400 | 130 | 2400 | 130 | Petitions to the Commissioner |
| 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(a) |
| 1806 | 180 | 1806 | 180 | Submission of information Disclosure Sheet |
| 1809 | 780 | 1809 | 395 | Filing a submission after final rejection (37 CFR § 1.129(a)) |
| 1810 | 780 | 2010 | 395 | For each additional invention to be examined (37 CFR § 1.129(b)) |
| Other fee (specify) | | | | |
| | | | | SUBTOTAL (2) |

Other fee (specify)

SUBMITTED BY

Name (Print/Type) William W. Schaal

Signature

Registration No.
(Attorney/Agent)

39,018

Telephone

(714) 557-3800

Date

06/16/05

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wk) 12/15/2004
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application. No. : 09/540,166
Applicant : Scott A. Rosenberg
Filed : 03/31/2000
TC/A.U. : 2673
Examiner : Vincent E. Kovalick

Confirmation No. 2691

Docket No. : 042390.P6729
Customer No. : 8791

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JUN 16 2005

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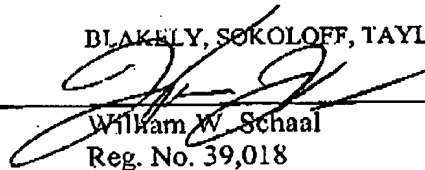
COMMENTS ON STATEMENT OF REASONS FOR ALLOWANCE

Applicants are assuming that the Examiner's statement of reasons for allowance is to be taken in light of the structure and interaction recited in the claims. Applicants note that the Examiner's various comments should not be used to read non-existent limitations into the claims.

Respectfully submitted,

BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP

Date: June 16, 2005


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